

# CLAIMS ONLY

SERIAL NO. \_\_\_\_\_

FILING DATE \_\_\_\_\_

APPLICANT(S) \_\_\_\_\_

## CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
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49	/					
50						
TOTAL IND.	6					
TOTAL DEP.	50	◀	◀	◀	◀	◀
TOTAL CLAIMS	56	◀	◀	◀	◀	◀

	*		*		*	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
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53						
54	/	↑				
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56		!				
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99						
100						
TOTAL IND.						
TOTAL DEP.		◀	◀	◀	◀	◀
TOTAL CLAIMS		◀	◀	◀	◀	◀

\* MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS

BEST AVAILABLE COPY